

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

TOM RICE FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Alex Eline

Mailing Address 7901 Beach Dr.

City	State	Zip Code
Myrtle Beach	SC	29572-4337

Purpose of Disbursement
Salary

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
10 / 17 / 2014

Amount of Each Disbursement this Period

197.94

Transaction ID : BF9DB4B1CB3C04B83902

B. Vertical Response

Mailing Address 50 Beale St., 10th Floor

City	State	Zip Code
San Francisco	CA	94105-1813

Purpose of Disbursement
Web Services

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
10 / 17 / 2014

Amount of Each Disbursement this Period

150.00

Transaction ID : B0CD5EF8F607942BC810

c. AccuChecks

Mailing Address 605 19th Ave N

City	State	Zip Code
Myrtle Beach	SC	29577-3103

Purpose of Disbursement
Payroll Taxes

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
10 / 20 / 2014

Amount of Each Disbursement this Period

1653.43

Transaction ID : BC8C76CE9B313458FA42

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

2001.37